

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY  
(Includes Reference to PCT International Applications)

ATTORNEY DOCKET NUMBER  
7107-4CIP

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMPACT SUTURE PUNCH WITH MALLEABLE NEEDLE

the specification of which (check only one item below):

is attached hereto.

was filed as U.S. Patent Application Serial Number 10/815,338  
on April 1, 2004, as amended on        (if applicable).

was filed as a PCT international application number        on  
      , as amended under PCT Article 19 on        (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

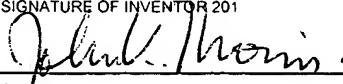
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the applications for which priority is claimed:

PRIOR FOREIGN PATENT APPLICATION(S) AND ANY PRIORITY CLAIMED UNDER 35 U.S.C. §119:

COUNTRY (If PCT Indicate PCT)	APPLICATION NUMBER	DATE OF FILING (Day, Month, Year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

**US**

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)		ATTORNEY DOCKET NUMBER 7107-4CIP		
<p>I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.</p>				
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:				
U.S. APPLICATIONS		STATUS (Check One)		
U.S. APPLICATION NUMBER		U.S. FILING DATE		
10/165,468		06/07/02		
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NUMBER		PCT FILING DATE		U.S. SERIAL NUMBERS
<p><b>POWER OF ATTORNEY:</b> As a named inventor, I hereby appoint registered patent practitioners associated with Customer Number 30448 to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith.</p>				
Send Correspondence to: Customer Number 30448 Akerman Senterfitt Post Office Box 3188 West Palm Beach, FL 33402-3188			Direct Telephone Calls to: Theodore M. Green 561.653.5000	
201	FULL NAME OF INVENTOR	FAMILY NAME MORRIS	FIRST GIVEN NAME JOHN	SECOND GIVEN NAME K.
	RESIDENCE & CITIZENSHIP	CITY ANN ARBOR	STATE OR COUNTRY MICHIGAN	COUNTRY OF CITIZENSHIP UNITED STATES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3125 HUNTING VALLEY	CITY ANN ARBOR	STATE & ZIP CODE/COUNTRY MICHIGAN 48104 / USA
202	FULL NAME OF INVENTOR	FAMILY NAME VAN WYK	FIRST GIVEN NAME ROBERT	SECOND GIVEN NAME A.
	RESIDENCE & CITIZENSHIP	CITY LARGO	STATE OR COUNTRY FLORIDA	COUNTRY OF CITIZENSHIP UNITED STATES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 10801 STARKEY ROAD, #104-16	CITY LARGO	STATE & ZIP CODE/COUNTRY FLORIDA 33777 / USA
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		
 7-19-04				
DATE		DATE		

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)		ATTORNEY DOCKET NUMBER 7107-4CIP
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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	ABANDONED	PENDING
10/165,468	06/07/02			X

PCT APPLICATIONS DESIGNATING THE U.S.			
PCT APPLICATION NUMBER	PCT FILING DATE	U.S. SERIAL NUMBERS	

POWER OF ATTORNEY: As a named inventor, I hereby appoint registered patent practitioners associated with Customer Number 30448 to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith.

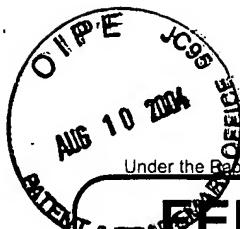
Send Correspondence to: Customer Number 30448 Akerman Senterfitt Post Office Box 3188 West Palm Beach, FL 33402-3188	Direct Telephone Calls to: Theodore M. Green 561.653.5000
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201	FULL NAME OF INVENTOR	FAMILY NAME MORRIS	FIRST GIVEN NAME JOHN	SECOND GIVEN NAME K.
	RESIDENCE & CITIZENSHIP	CITY ANN ARBOR	STATE OR COUNTRY MICHIGAN	COUNTRY OF CITIZENSHIP UNITED STATES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3125 HUNTING VALLEY	CITY ANN ARBOR	STATE & ZIP CODE/COUNTRY MICHIGAN 48104 / USA

202	FULL NAME OF INVENTOR	FAMILY NAME VAN WYK	FIRST GIVEN NAME ROBERT	SECOND GIVEN NAME A.
	RESIDENCE & CITIZENSHIP	CITY LARGO	STATE OR COUNTRY FLORIDA	COUNTRY OF CITIZENSHIP UNITED STATES
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 10801 STARKEY ROAD, #104-18	CITY LARGO	STATE & ZIP CODE/COUNTRY FLORIDA 33777 / USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202 
DATE	DATE 8-5-04



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEET TRANSMITTAL

## for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 65.00)

## Complete if Known

Application Number	10/815,338
Filing Date	April 1, 2004
First Named Inventor	Morris, et al.
Examiner Name	
Art Unit	3731
Attorney Docket No.	7107-4CIP

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None

 Deposit Account:

Deposit Account Number  
50-0951

Deposit Account Name  
Akerman Senterfitt

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		(\$ 0.00)	

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent	-20**	=	
Claims	- 3**	=	
Multiple Dependent		=	

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
<b>SUBTOTAL (2)</b>		(\$ 0.00)

\*\*or number previously paid, if greater; For Reissues, see above

## 3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	65.00
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	
Other fee (specify)			

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 65.00)

## SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Theodore M. Green	Registration No. (Attorney/Agent)	41,801	Telephone	561.653.5000
Signature	<i>Theodore M. Green</i>			Date	August 6, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.